

Civil Action No. 2:21-cv-04235-NKL

**PROOF OF SERVICE**

*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Merrick B. Garland, US Attorney General  
was received by me on *(date)* 01/18/2022 .

☐ I personally served the summons on the individual at *(place)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* \_\_\_\_\_  
\_\_\_\_\_, a person of suitable age and discretion who resides there,  
on *(date)* \_\_\_\_\_ , and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* \_\_\_\_\_ , who is  
designated by law to accept service of process on behalf of *(name of organization)* \_\_\_\_\_  
\_\_\_\_\_ on *(date)* \_\_\_\_\_ ; or

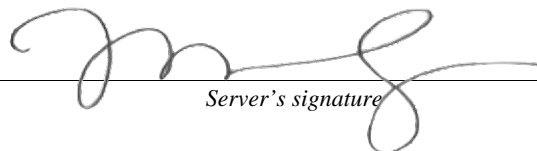
☐ I returned the summons unexecuted because \_\_\_\_\_ ; or

☒ Other *(specify)*: I served the summons on Merrick B. Garland, US Attorney General, Attn: Civil  
Process Clerk, 950 Pennsylvania Avenue NW, Washington DC 20530 via  
CM/RRR (sent on 1/19/2022, received on 1/27/2022).

My fees are \$ \_\_\_\_\_ for travel and \$ \_\_\_\_\_ for services, for a total of \$ 0.00 .

I declare under penalty of perjury that this information is true.

Date: 02/08/2022

  
\_\_\_\_\_  
*Server's signature*

Thelma Alvarado-Garza, Paralegal  
\_\_\_\_\_  
*Printed name and title*

1114 Lost Creek Blvd., Ste. 410  
Austin, Texas 78746  
\_\_\_\_\_  
*Server's address*

Additional information regarding attempted service, etc:

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

## 1. Article Addressed to:

Merriek Garland  
US Attorney General  
Attn: Civil Process  
Clerk



9590 9402 5699 9346 4530 83

## 2. Article Number (Transfer from service label)

7016 0600 0000 2973 9992

**COMPLETE THIS SECTION ON DELIVERY**

## A. Signature

**X**

- ☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

- D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

JAN 27 2022

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Mail  
Mail Restricted Delivery